U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

No. 64 — February 1960

Additional Grants to States

A total of 51 States and Territories have now received WHCA grants, two since the last listing in Aging 62. Beginning with the September 1959 issue of Aging (with the exception of last month's issue), all 51 grants and individual Governors' designees have now been published. The e a Re two most recent ones are:

MAINE-\$15,000 Mr. Robert C. Russ Treasurer, State of Maine Augusta. MONTANA—\$5,000 Mr. Ralph C. Knoblock

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Vice Chairman and Secretary Montana Committee on the Problems of the Aging

Supplementary grants have also been made in the meantime to Colorado, Idaho, and Nevada, bringing their respective totals to \$15,000.

The only States and Territories from which no grant applications have been received up to February 1, 1960, are Indiana, Wyoming, and

While Indiana has not requested a Federal grant to participate in the WHCA, Governor Harold Handley, in publicly refusing to request the grant (because he prefers not to extend Indiana's participation in further Federal programs), asked for and received from the State Budget Committee a special \$15,000 allocation. The State Commission on the Aging and Aged, in turn, allocated \$5,000 to the State Board of Health to conduct a very detailed study of the 73 county homes in the State. The remaining \$10,000 is being used by the Commission to extend its community organization work in preparation for full participation in the WHCA. For more information: Morton Leeds, Secretary, Commission on the Aging and Aged, 3516 Central Avenue, Indian-

The grant application from Wyoming is to be submitted shortly.

According to our San Francisco HEW Regional Office, the Acting Governor of Guam reports that Guam will not be participating in the White House Conference on Aging. Thus Guam is the only one of 54 jurisdictions under Public Law 85-908 not actively engaged in WHCA preparations. Fifty States, the District of Columbia, Puerto Rico, and the Virgin Islands, are all involved in planning work.

CBS Television Program, March 1

Miss Helen Hayes, the first lady of the American theatre, will be hostess for "The Lonely Years," fifth program in the CBS-TV "WOMAN!" series, scheduled to be telecast Tuesday, March 1, from 3 to 4 P.M., EST.

Filmed in Portland, Oregon, "The Lonely Years" is a study of the problems of aging, concentrating on the story of a sixty-two year old woman who has just come to the realization that she is growing old. It will examine the physical problems she faces: housing compatible to her needs, decrease in income, the impending change in her way of life because she cannot do the things she used to do. It will pose the basic psychological question: will her old age be active or passive, will she withdraw and vegetate, or continue to live a full life?

The basic premise of the program is that, given fair health and a moderate income, it is up to the individual whether or not she ages gracefully, whether or not her old age is a time of happiness and dignity.

Senator Pat McNamara, Chairman of the Senate Subcommittee on Problems of the Aged and Aging, will present some of the conclusions of hearings with experts and older people themselves on these problems.

"The Lonely Years" was produced with the guidance of the National Committee on the Aging.

Person County, North Carolina: **Home Care Goes to the Country**

The first organized rural home care program in the United States has been started in Person County, N. C., by Dr. O. D. Garvin, the energetic and imaginative local health officer.

Even though home care services of various kinds have been established in different places for some time-including rural areas such as those in Kentucky and Florida—and definitions of "organized home care" are still under consideration by the American Medical Association, the American Hospital Association, Blue Cross, Blue Shield, and the Public Health Service, it is significant to note that Dr. Garvin's program, as recognized and reported by the Division of Special Health Services of PHS, marks a milestone in medical care for the chronically ill and aged.

The staff consists of one medical social worker, six public health nurses, one physical therapist, one public health nursing supervisor, clerical help, and other Health Department personnel. The nurses, clerks, and other Health Department personnel are working part-time on the home care program since they are active in the general public health program as well.

Patients are referred by private physicians. There are no restrictions based on race, creed, color, or economic status.

The Health Department team teaches patients, and provides services as ordered by the attending physician. Proper care is taught by the nurse, social worker, and therapist under the direction of the private physician.

An annual budget of \$22,000 provides the staff salaries for time spent on the project. Funds are provided by the State Health Department, the U. S. Public Health Service, and the Person County Commissioners. The physicians' fees are paid by the patients, or by public or voluntary agencies. No charge is made for this home care service, except for physicians' fees.

The objective of the program is to demonstrate how official and non-official agencies can cooperate with a community to unite their efforts in an organized program for assisting private physicians in the home care and restoration of the chronically ill in a rural area.

Some 45 patients are now enrolled. They are patients of 10 Person County physicians. Of the patients enrolled, over 50% are over 60 years of

The local hospital helped. Funds of the National Foundation were used to equip a new physical therapy department at the Person County Memorial Hospital.

Strong support has been given to this proje "2 by the community. The County Medical Socie 1 gave its unanimous approval. Many volunter out are working with the program. Five committee me have been appointed: Health Education, Ph mil curement of Supply, Vocational Rehabilitation Na Social Service, and Chaplain and Recreation,

The increasing number of chronically ill, that increasing cost of hospital care and lack of hospital pital beds, the lack of restorative services, a sm the physicians' need for ancillary supportthese factors point to the strong need for the rural home care program.

For additional information, or a copy of a \$8 excellent illustrated brochure, available in limite supply, describing this project: Dr. O. Davi "s Garvin, District Health Director, The District old Health Department, Chapel Hill, N. C.

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Hawaiian "Personal Care Homes"

A plan developed on the Hawaiian Island Kauai five years ago for care of the aged in pri vate "personal care homes" instead of in inst tutions is now attracting statewide attention.

The program is the brainchild of Mrs. Man Sabate, administrator of the Department of Pub lic Welfare for Kauai, in Lihue.

In a recent report in the Honolulu Star-Bulletin it was reported that, according to Mrs. Sabate, personal care home is a private home careful selected and especially equipped to care for both the aged and the chronically ill.

There are 24 such homes on Kauai with 56 pt tients. Most of the homes are equipped to a commodate three or four patients. Public welfar payments are made directly to the patients. They or in turn pay the home operators.

Payments range from \$75 to \$160 a month, de pending on whether the occupants are ambulator, fi or bed-ridden.

Mrs. Sabate says the program has worked out S to the satisfaction of both patients and home of re erators.

The private homes provide individual attention for warmth and understanding. The oldsters' feeling fr of independence and usefulness is strengthened Expense to the taxpayers is held to a minimum

Before the personal care homes are approved they are inspected by a team made up of Mrs. Sabate, the fire chief, building inspector, sanitation officer, public health nurse, and social worker.

The public health nurse watches over the health of patients and advises the operators in their care

"There's a healthy competition among the home operators," Mrs. Sabate says. "They're very proud of their homes. A patient can leave a home any time he's not satisfied with the treatment."

proje *20 Years of Social Security"

Socie The Social Security Administration rounded unter out 20 years of monthly insurance benefit paymitte ments when January checks were mailed to 133/4 n, Pr million men, women, and children all over the itatio Nation.

Since January 1940, 21 million beneficiaries tion. ill, & have received benefits totalling \$50.4 billion. This of ho includes all payments to disabled workers under es, an amendments to the law enacted in 1956.

ort- At the end of 1959, the 133/4 million people refor the eiving benefits under the old-age, survivors, and disability insurance provisions were being paid of a \$850 million a month.

limite Although the general public may think of Davi "social security" as something mainly for the Distrig older population, the survivors' provisions of the law also provide significant protection for American families. Ninety percent of the mothers and children in the country are now eligible for survivor benefits should the head of the family die.

The Old-Age and Survivors Trust Fund is estimated to be \$20.1 billion as of December 31, 1959. The Disability Insurance Trust Fund, established on January 1, 1957, is estimated at \$1.9 billion.

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inst-Beginning with the first paychecks received in January, employees are paying a tax of 3 percent . Man on the first \$4,800 of annual earnings. This sum is matched by their employers. Self-employed people will pay a tax of $4\frac{1}{2}$ percent on the first \$4,800 of net earnings for 1960, but this tax will not be due until early in 1961.

ford Foundation Project to Study Community Organization for the Elderly

The Ford Foundation has announced the approvelfar priation of \$300,000 for a series of community organization experiments to improve or develop new programs for older persons. From this appropriation, grants will be made during the next five months to eight communities. The Florence Heller Graduate School for Advanced Studies in Social Welfare at Brandeis University has already received a grant from this appropriation to coordinate and evaluate the pilot projects. Carefully documented plans are expected to result from these pilot operations for use by citizen and professional leaders in many communities who wish to improve their work with older persons.

Financial assistance will be given, together with technical consultation, for periods of two to four years to help local agencies and their staff to review community resources, coordinate and adapt current programs, and develop criteria for new programs where needed. The pilot projects are expected to concentrate first on defining what can and what cannot be expected from existing agencies.

Pilot projects will be selected in communities which represent various approaches to the subiect: large and small communities; rural and urban areas; and different organizational pat-The evaluation will concentrate on: the program results in each community; the effectiveness of various organization patterns in developing comprehensive community programs; and minimum performance standards. The project is also expected to publish guidelines for community planning and organization, case studies, and teaching materials for professional education.

An expert committee will assist The Ford Foundation in screening applications, and The Florence Heller Graduate School in the coordination and evaluation of these pilot programs. The coordination and evaluation portion of the Ford project will be under the general direction of Dean Charles I. Schottland, former Commissioner of Social Security. The committee includes Miss Ollie Randall, Vice Chairman of the National Committee on the Aging; Dr. Robert Morris, Nathan Manilow Associate Professor of Community Planning; and Mr. Howard Gustafson, Executive Director of The Health and Welfare Council of Indianapolis and Marion County. Miss Randall will serve as chairman of the screening committee. The committee will be augmented by special consultants as needed.

The selection of pilot projects will be made by the Foundation upon the recommendation of the screening committee. Selection will be made during the next five months. Preliminary criteria for community selection will include among others:

- 1) Existence of local interest and organization capable of carrying out agreed upon plans.
- 2) Support of demonstrations or experiments which attempt to mobilize community-wide resources including public and private services, and a variety of welfare, health, volunteer, and educational resources.
- 3) Projects which seek to coordinate, develop, and promote comprehensive community programs. Projects to extend specific services directly to older individuals will not be accepted.
- 4) Local agency readiness to share in an objective evaluation of results.

It was emphasized that this project is concerned with experiments in the "organization and coordination" of services and not with the experimental development of new services.

Information about this program, including the criteria for the selection of pilot communities, should be addressed to Dr. Robert Morris, Secretary, Ford Foundation Community Organization Project on Programs for Older Persons, Brandeis University, Waltham, Mass.



Special Staff on Aging

U. S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

ARTHUR S. FLEMMING, Secretary

Published to share and exchange information about programs, activities, and publications among interested individuals, agencies, and organizations, under approval of the Bureau of the Budget dated August 22, 1957.

Subscriptions (\$1.00 for 12 issues, 50¢ additional for foreign mailing, or 10¢ for single copies) should be addressed to Superintendent of Documents, U. S. Government Printing Office, Washington 25, D. C.

All other communications may be sent directly to Editor of Aging, Special Staff on Aging, U. S. Department of Health, Education, and Welfare, Washington 25, D. C.

Progress on Conference Plans

Chairman Robert Blue of the Subcommittee on Program Organization and Arrangements, one of the original six subcommittees established by the National Advisory Committee for the White House Conference of Aging (see Aging 57), has scheduled a meeting of his Executive Committee on February 15 to review and evaluate the plans and proposals which have been prepared, and the many suggestions for the Conference program organization and arrangements. Recommendations from this Executive Committee will be submitted to the full National Advisory Committee, and to HEW Secretary Flemming for ultimate approval. As soon as they are approved, all Conference arrangements will be presented in Aging.

Members of this Executive Committee, also serving on the National Advisory Committee, are Mrs. Hazel K. Barger of Virginia, Mr. Charles J. Graham of Pennsylvania, Mr. Eugene Lipitz of Maryland, Mr. Holland L. Robb of North Carolina, and Mrs. Lucille B. Wilkins of Illinois. Mrs. Elizabeth R. Willcox is serving as staff liaison officer in Washington, in the newly created position of Special Assistant for the WHCA to the Director of HEW's Staff on Aging.

A date of March 15 has been set as deadline for submission to Chairman Robert W. Kean of the National Advisory Committee of all 20 subjectmatter background ("situation") papers. They will be made available as shortly thereafter as possible.

During April there will be a meeting of all Planning Committee Chairmen (see Aging 59, p. 2).

A meeting of the entire National Advisory Committee for the White House Conference on Aging is scheduled for May 12-13 in Washington.

Two New Regional Appointments

During the past month, two new Regional Rep. resentatives for the White House Conference on Aging were appointed. The complete list pub. lished on page 4 of Aging 62 may be brought up to to date with these changes.

In Region II (New York City), Mr. Stanley J. Fioresi replaces Mr. Edmond J. Sabatini. Mr. Sabatini has transferred to another position within DHEW in Philadelphia where he lives Mr. Fioresi comes from a recent assignment in the New York regional office. Prior to that he was district manager for the Social Security Ad. ministration in Paterson, N. J.

In Region IV (Atlanta), Mrs. Virginia M. Smyth now fills a position originally held by Mr. Cecil Simpson who returned late last summer to his assignment as social security district manager in Montgomery, Ala. Mrs. Smyth was Vice-Chairman of the Georgia Governor's Commission on Aging. She was an official of the State Department of Health in Georgia.

Both Mr. Fioresi and Mrs. Smyth attended a meeting of regional representatives in Washing. ton January 18-19.

Medical Tests for Recreation Program

Significant medical findings, based on examination last summer of 51 members of the Philadelphia Center for Older People, show the need for physical fitness campaigns by recreation centers for the aged. Dr. John N. Lindquist of the Jefferson Medical College Hospital conducted the examinations before the oldsters started a day camp program. He reported that five had conditions which needed prompt medical attention.

About 16 percent of the 37 women and 14 men (from age 60 to 92) in the group had physical abnormalities for which treatment could be instituted. One man, aged 82, suffering from congestive heart failure, had to be admitted to the hospital immediately.

In anticipation of participation in conducted tours, walks, table games, croquet, song fests, handicrafts, and help with camp chores, the director of the Philadelphia Center had appealed to the Geriatrics Department of the Jefferson Medical College Hospital for help in determining the physical fitness of Center members.

As a result of Dr. Lindquist's survey at the Hospital, two women chose not to attend the camp, one was referred to her family physician, and one man was able to attend the camp parttime. The regular camp schedule was 10 a.m. to 6 p.m. three days a week, with bus transportation furnished

from the Center.

Special "Well-Oldster" Project in Toledo

In Toledo, Ohio, the City Health Department and the Academy of Medicine are cooperating in "Well-oldster" project which is intended to:

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1. Develop a meaningful history form for health appraisal of persons over 60.

2. Test selected screening techniques as a practical method of case-finding in older persons.

3. Develop normal ranges of selected laboratory tests on older persons.

4. Demonstrate the value of periodic health appraisals on older persons.

5. Determine how to motivate older persons to seek periodic medical examination.

6. Bring medical and paramedical skills to "well" oldsters in an organized manner to find early or symptomless cases of chronic diseases so that primary or secondary preventive measures may be applied.

7. Establish from such appraisal conferences a pattern of effective medical referral to private practitioners, dentists, clinics, or public medical care facilities.

8. Establish the optimum period for follow-up health appraisals.

9. Demonstrate the effectiveness of Health Department and Medical Academy collaboration on a health maintenance project.

10. Demonstrate the effectiveness of medical and other agency collaboration in a program for the chronically ill and aging.

Core idea of this study project is to admit and keep track of 80 to 120 persons over 65 for a period of several years. Persons found to have a condition in need of medical or surgical attention will be "discharged" from the project and referred to their private physician.

All of the services provided are on a preventive basis with such diagnostic screening services as will be required to develop a medical profile for each patient. No medical or technical care services will be provided. All patients classified into a "well" category will be placed on a routine sixmonth health appraisal schedule. In addition to medical screening, there is also sociological and nutritional screening.

Planned activities include:

1. Group orientation and discussion for newly admitted patients, led by a public health nurse or social scientist.

2. Individual physical examination and screen-

ing by project physicians.

3. Group discussion, counseling, and education led by various professional staff persons of different disciplines on health topics of interest to oldsters.

For more information: Dr. Hilbert Mark, Health Commissioner, City of Toledo.

CONFERENCES AND COURSES

The National Health Council (1790 Broadway, NYC 19), with a membership of nearly 70 public and private organizations in health and healthrelated fields, is giving special emphasis to health of the aged this year in preparation for the WHCA. As previously announced (see Aging 55. p. 4), the theme for the Council's 1960 National Health Forum, to be held March 14-17 in Miami Beach, is "Positive Health of Older People."

Under the chairmanship of Dr. Edward L. Bortz of Philadelphia's Lankenau Hospital, and with the aid of the Council's Forum Consultant, Aubrey Mallach, the Forum Committee has planned sessions around these sub-themes: "Changing Attitudes to Old Age," "The Vision of Health Maturity-The Promises of Current Research," "Professional Practice with Older People-A Challenge to Practitioners," "Older People Are Needed-A Challenge to America,' "Looking at a New World in the Making Today, and "Changing Aging Man-We Can Do What We Need to Do.'



"More Life in Living (in a Time that Promises More Years in Life)," an informal home study course by Jean C. Ogden, has been issued by the Home Study Bureau of the Division of Extension and General Studies, Box 3697, University of Virginia, Charlottesville. The 81-page paperbound syllabus sells for \$3. A limited supply of a special kit of study materials, including the syllabus, is available for \$5. Formal registration for the complete non-credit course of 10 lessons, including criticism of submitted lessons, is \$16.

This study and discussion guide for individuals and groups is meant to help them think constructively of the later years.



"Social Work-Its Function and Responsibilities in a Changing World" will be the theme of the Tenth International Conference of Social Work to be held in Rome, Italy, from January 8 to 14, 1961. A preliminary program will be ready soon. Major purpose of the International Conference is to provide a forum for the discussion of social welfare and related issues.

Any interested person is welcome to attend. Information about registration and housing, as well as low-cost group travel and study tours, is available from the U.S. Committee of the International Conference of Social Work, Room 1012, 345 E. 46 St., NYC 17.

Northern California—Nevada Council of Churches Acts on Aging

This article was prepared and submitted by Elsie Thomas Culver, Chairman, Commission on the Churches' Responsibility to Older Persons of the Northern California-Nevada Council of Churches. Her address is 1890 Arch St., Berkeley, Calif.

Church work in the field of aging is still so new that programs often are apt to take on the attitude and outlook of the individual who is doing most of the work and/or providing the budget. It seemed particularly important, therefore, to the Northern California-Nevada Council of Churches to survey the field in general, and to offer to all concerned some general suggestions, before any isolated and partial de facto programs assumed aspects of being "The" church program in aging.

The Council's Commission on the Churches' Responsibility to Older Persons consulted with some 20 denominations represented in the Council, and also with Catholic, Jewish, and secular leaders in the field of aging, not only in its own territory but across the country, and even overseas. Out of this there developed a "Memo to the Churches" which seeks to define the full scope of church responsibility to the aged and aging, and also to put church and community programs for seniors in their proper perspective and relationship.

The Commission held two major conferences in the past year, each attended by some 200 leaders in the field of aging. Both church leaders and secular experts were used as resource people. Workshop subjects included housing, employment discrimination, health insurance for retirees, retirement counseling, the therapeutic discussion group, education for retirement, leadership training for senior centers, making use of community social welfare facilities, and the role of the older person as a volunteer worker in the social and civic life of the community. The Commission cooperates closely with State and county agencies. Almost all members work in the "aging" programs of their own local churches or denominations.

Out of its conviction that persons should use their "bonus years" to round out their lives to the full extent of their God-given capacities, there developed the "Senior Peacebuilders" program, now incorporated as a private tax-free corporation under California law, with the objective of "expanding the peaceful areas of life"—within one's self and one's family, in one's community, the nation, and the world.

The Commission tries not to duplicate services or research offered through secular channels, but rather advocates full cooperation of all church and community forces to help older people become —or remain—happy, secure, and useful persons.

San Francisco Housing Authority Builds Senior Recreation Center

The San Francisco Housing Authority is starting construction of a Senior Recreation Center at a part of Yerba Buena Annex, a housing development in which 60% of the 211 apartments are designed especially for persons over 65.

The Center is the first building in San Francisc especially designed as a recreation center for Senior Adults. Cost is \$120,000. A social hall three class or craft rooms, a kitchen and two offices (one for use by agencies which offer coupseling services to older people) will be included

The Center, with an area of 5,000 sq. ft., will be in a one-story building, adjacent to the elever story apartment buildings. An outdoor patio, enclosed by an eight-foot wall, will have a barbecul pit and game courts, as well as attractive land scaping.

The Recreation and Park Department will operate the program. Activities will be offered to Senior Adults living in Yerba Buena Plaza and the proposed Hayes Valley apartments, as well at to residents of Yerba Buena Annex. In additionall older people in the surrounding area will be welcomed to the facility. The site is in the center of a district which has a higher concentration of older persons per block than any other part of the city.

The decision to build the Center followed in formation from the Recreation and Park Department that existing and planned city facilities could not adequately serve the older people, who need a building they can call their own, especially designed for their use.

The Recreation and Park Department Commission has applied to the Mayor and Board of Supervisors for money to equip the center, and an annual budget for staff and maintenance. The Recreation Center will meet a real need. The Recreation and Park Department has a staff trained especially for service to older adults, but no facilities can now be given to the program of a full time basis, which hampers their efforts.

For more information: San Francisco Housing Authority.

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Speaking of aging, a distinguished Senator said. "We should fortify ourselves against old age by maintaining health of body and mind. The 'stupid old men' of comedy owe their stupidity to their own idleness and drowsiness. Old age is revered only if independent; and just as a touch of age is the best thing for youth, so a touch of youthful fire preserves the mind from aging along with the body."

(Senator Marcus Tullius Cicero, late of Rome).

NEWS ITEMS

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The importance of area-wide planning in the development of a coordinated hospital system is stressed in a new PHS publication, "Principles for Planning the Future Hospital System." This is a report of the proceedings of four regional conferences held in Chicago, New Orleans, Salt Lake City, and Washington, D. C., during April and May 1959, under the joint sponsorship of the American Hospital Association and the U.S. Public Health Service.

"The wide-spread interest being shown in this report is a good indication of the desire on the part of both the providers and consumers of hospital services to work toward finding a solution to the many medical care problems facing our nation," Surgeon General Leroy E. Burney said. He noted that the primary purpose of the report is to set forth proposed guidelines which would be helpful for planning groups concerned with area-wide planning.

Single free copies of the report (PHS Publication #721), in limited supply, are available from the Division of Hospital and Medical Facilities, Public Health Service, Washington 25, D. C. Copies are also for sale @ \$1.25 from the Superintendent of Documents.

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The Wisconsin Council of Non-Profit Homes and Hospitals for the Aged (see Aging 59, p. 3) has been asked by the State Board of Health to establish a special committee to help the Board's Division of Hospitals and Related Services in developing accreditation standards for non-profit Homes, and commercial nursing Homes of superior standards.

Mr. Louis J. Novick, President of the Council, reports that this may be the first such group to be offered this kind of assignment by a State Board of Health. His address is 2436 N. 50th St., Milwaukee 10.

*

In Massachusetts the Housing Authority Law was amended last August to authorize the fixing of rentals in low-rent housing projects at rates sufficient to provide recreational and community facilities in or near such projects. The law previously permitted the provision of such facilities, but prohibited the incurring of any expense by an authority in acquiring land for them, specifying that the Commonwealth should not be responsible for any expenditures incurred. Supervision and maintenance of recreational and community facilities, under the amendment, is also an approved expenditure item.

A new training and research program, one of the first of its type in the Nation, to provide for effective collaboration between the social sciences and health fields has been established at Duke University, Durham, N. C. Headed jointly by Dr. John C. McKinney, chairman of the Duke sociology department, who has received the additional title of professor of medical sociology, and Dr. Ewald W. Busse, chairman of the Duke Medical Center's psychiatry department, the program has been established in recognition of the need for social scientists in medicine.

The Duke scientists cited old age as one of a number of areas in which the social sciences are playing an increasingly significant role. Medical advances have lengthened the average life span, and sociologists need to join forces with the health team to make the added years of life a time of

happiness and usefulness to society.

The new program at Duke is concerned primarily with research that utilizes the combined knowledge and skills of specialists in the social sciences and in medical-health fields. The other principal activities are teaching at the undergraduate level and training research investigators in medical sociology.

*

A statewide symposium on problems of the aged was held at the University of New Mexico in Albuquerque on January 23 and 24. Sponsored by the New Mexico Medical Society and the New Mexico Department of Public Health, the program included Governor John Burroughs; Maurice Sanchez, chairman of the Albuquerque City Commission; and Dr. Theodore Klump, New York, member of the American Medical Association Committee on Aging.

The State medical society had approved a plan calling for a statewide conference on aging. It recommended that the State society and its county medical societies take the leadership on problems of aging, coordinating efforts with all interested groups in the field. It asked for extension of effective methods of financing health care for the aged. A total of 3,000 invitations were sent out to key State and national personnel.

For more information: Dr. Molly Radford, Division of Gerontology, State Dept. of Health, P. O. Box 711, Santa Fe.

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Mr. Lawrence G. Corey, Technical Director for the WHCA Planning Committee on Research in Gerontology (Social Science), and Specialist in Aging on DHEW's Special Staff on Aging, resigned January 29 to pursue full-time graduate study in psychology at the University of California in Berkeley. He will be in the Department of Child Development under Prof. Harold Jones.

Recreation Study in New Jersey

The successful completion was announced last month of a coordinated community recreation project in the institutions of Sussex County, New Jersey, sponsored by the National Recreation Association and the Alfred P. Sloan Foundation.

Purpose of the one-year demonstration and study program was to determine the various costs and problems involved in an all-inclusive recreation project for more than 200 of the ill, aged, and handicapped in the County's four nursing homes, one general hospital, and the welfare home.

Results of the study indicate that one wellqualified recreation director, with the aid of trained volunteers, can provide a full program of activities for less than \$2 per patient per month, or \$12 a session. Public cooperation, not unlimited funds, seems to be the keystone of a successful

community recreation project.

After explaining the program to nursing-home owners and hospital administrators in the area, all of whom agreed to cooperate, the NRA's Consulting Service on Recreation for the Ill and the Handicapped publicized the project through the county newspaper, local radio station, and voluntary agencies; thus volunteer recruitment of interested persons was started. A County Recreation Council for the Ill, Aged, and Handicapped, consisting of fifteen key community leaders from the County Freeholders, various service organizations, and the medical profession, gave valuable guidance and information in monthly meetings with members of the Consulting Service.

45 volunteers were enrolled in a recreation training course with specialists as instructors in art, crafts, social events, games, and music. Also, a psychologist spoke to the volunteers on the emotional aspects of illness. At the end of the training program, these recreation volunteers were ready to service the homes and the hospital two to three times a week. Eight months later there was an impressive increase in the number

of trained volunteers.

The volunteers worked under the supervision of a recreation director who had carefully evaluated each of the patients in the institutions to determine their social needs. Common interests of patients for group activities — singing, rhythm bands, birthday and holiday celebrations, movies, and parlor games — were stressed. For individual therapy, the patient's physical and mental limitations, along with his cultural, religious, and occupational background, were the deciding factors in his personal leisure-time activity.

A financial plan for continuing this program on a coordinated basis, with each institution sharing the cost of the recreation worker's salary, is now

being developed.

For information on how to duplicate this recreation project in your area, write to Mrs. Beatrice H. Hill, Director, Consulting Service on Recreation for the Ill and Handicapped, National Recreation Association, 8 W. 8 St., NYC. 11.

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In Brookline, Mass., a special research project will be conducted by the local health department, under a two-year \$50,000 grant from the Division of General Medical Sciences at the National Institutes of Health. Assistance and guidance is provided by a Technical Advisory Committee of experts at Boston and Harvard Universities.

This project, "Utilization of Health and Allied Services," is intended to determine the factors responsible for differential patterns which older people follow in making use of health services and related social, recreational, and educational opportunities. The survey is intended to help develop a better utilization of future programs for the aged. It is under the direction of Dr. Leon J. Taubenhaus, Brookline's Director of Public Health, and Mr. John G. McCormick, a health educator. The local Community Council's Health Sub-Council will also play an active part in the work of the survey.

In Brookline, a suburb of Boston, 13% of the

adult population are aged citizens.

A standard interview schedule from a random sample of from 600 to 800 elderly individuals will be used.

*

The "Golden Year, Inc.," 511 Fifth Ave., NYC 17, is a program for people with limited funds and unlimited time who wish to spend a full year—including travel time from and to New York—browsing about the major cities of Western Europe on a "pay-as-you-go" basis. Costs are paid by the month, not in a lump sum in advance. The monthly payment is just under \$300.

Members leave the United States at their own convenience. Rates are per person, two in a room. For application blanks, or further information: Mr. A. Morsbach, President, Golden Year, Inc.



A new Information Service for Aging was established in January at 610 Main St., Worcester, Mass., to answer questions by phone and in person about community services for the aging ISFA is being set up as a red feather agency. It is not intended to be a counseling service, but an information and referral service which complements, rather than duplicates, existing agency functions.

More information: Dr. Samuel Bachrach, The New England Adage, 44 West St., Worcester 9

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"What is the Commission on the Aging?" (December 1959), a leaflet describing the Maryland Commission on the Aging, Room 403 State Office Bldg., 301 W. Preston St., Baltimore 1, is available, without cost, upon request to Executive Director Gerald Monsman. This flyer explains the organization and purpose of the State Commission in simple, direct fashion. It will be of particular interest to other States who want to publish something like it. Mr. Monsman also has available for distribution Governor J. Millard Tawes' October 21 address, mentioned in the story on Baltimore's "Operation Joblift," Aging 62, p. 4.

The first of Maryland's four regional conferences leading up to the State Conference in September, was held January 20 in Bethesda. An outstanding program covered five major areas of interest. A number of specific recommendations for action were proposed. In next month's Aging we hope to have a report on the effective planning for this community conference.



The 1959 Minnesota Directory of Licensed Hospitals and Related Institutions, issued by the Minnesota Department of Health, is available at \$1 (stamps not acceptable) from the Documents Section, Room 115, State Capitol, St. Paul 1.

This listing and categorization (43 pp.; processed) is a tabulation of information received through the State's hospital licensing law. Major categories include "General" and "Specialized" hospitals, and "Nursing" and "Boarding Care" homes. A total of 687 institutions as of May 15, 1959, are listed and/or described.



"Community Action on Aging," a review of the experience of local committees on aging in Michigan, was published in October by the State of Michigan's Legislative Advisory Council on Problems of the Aging, 3032 Rackham Bldg., Ann Arbor. Copies of this report (15 pp.; processed) are available without charge from the author, Mr. Anthony Lenzer, Executive Secretary of the State

The report covers briefly the history, objectives, organization, and activities of the various local committees on aging in Michigan, and also presents a general statement of the problems and sues which they face. It is, in part, an expansion and updating of a previous study on "Local Committees on Aging in Michigan" which was Published by the State's Advisory Council in June ster 9. 1958.

The new Newsletter of Michigan's Commission on Aging, intended as an intrastate information exchange, contains many statewide news items. Free copies are available from the Commission, Western Michigan University, Kalamazoo.



The entire February issue of The International Altrusan (Vol. 37, No. 6; Altrusa International, Inc., 332 S. Michigan Ave., Chicago 4; \$2.25 a year, single copy 25¢; published September through June), is devoted to the theme, "Taking the Old out of Age." This attractively illustrated magazine for executive and professional women features timely philosophical and practical articles. Subjects include: "Attitude," geriatric rehabilitation, progress in research at Duke University, "Scholarships for Older Women," etc.



"Little Strokes—hope through research" (PHS Publication No. 689) is a new 15-page pamphlet issued by the National Institute of Neurological Diseases and Blindness of the U.S. Department of HEW. It is for sale from the Superintendent of Documents @ 10¢, and a limited supply of free copies is available, upon request, from the Public Inquiries Branch, Office of Information, U. S. Public Health Service, Washington 25, D. C.

"Little strokes commonly begin in the fifties or sixties, or even in later years . . . But the human core of accomplishment, the ability to work and play, to love and laugh, survives in many individuals for many a year." This non-technical pamphlet describes little strokes, and explains some of the research attacks on this problem by NINDB.



"Costs of Life Care in Homes for the Aged" (revised October 1959) is a handy folder with information for estimating the rising costs of life care. Using illustrative examples, it explains how to figure the investment base needed to provide care for the prospective aging home resident, taking into account four factors which operate to increase cost: increasing longevity, cost of living, wage scales, and yields on safe investments.

Calculations are based on conservative insurance company experience. The authors show why provision for life care on a contract basis is more expensive than is generally realized. A set of actuarial tables is provided for men and women, so that the reader can estimate individual costs for anyone between age 50 and 95, according to average life expectancies.

Limited supplies of this folder are available from: Board of Missions, Office of Health and Welfare, United Presbyterian Church in the U.S.A., 475 Riverside Dr., NYC 27.

Senator Pat McNamara of Michigan, Chairman of the Subcommittee on Problems of the Aged and Aging (see Aging 59, p. 2 & 6), has announced that several recent reports are available from the Superintendent of Documents, Government Printing Office, Washington 25, D. C.:

"A Survey of Major Problems and Solutions in the Field of the Aged and Aging." (\$2).

"National Organizations in the Field of Aging." (\$1).

Hearings on "Federal Programs for the Aged and Aging," in limited supply. (\$1).

Several of the published hearings on "The Aged and Aging in the United States, the Community View-point," are already out of stock. They were sold at

Part 2. Boston Part 3. Pittsburgh Part 4. San Francisco Charleston, W. Va. Part 5.

Hearings which will be available, in limited supply, in the near future, include:

Part 6. Grand Rapids, Mich.

Miami Part 7.

Detroit. Part 8.

The Subcommittee's final report, "The Aged and Aging in the United States: A National Problem," is being published this month, in addition to a separate summary of the recommendations, "Committee Print 49952" (10 pp.).

The Subcommittee (Room 249, Senate Office Building, Washington 25, D. C.) has available, in limited supply, extra copies of several of the hearings and reports which may be requested at no charge, while the supply lasts.

"Implications for Librarians of the White House Conference on Aging," by Eleanor Phinney, Executive Secretary of the Adult Services Division of the American Library Association, and of the Association of Hospital and Institution Libraries, outlines many useful WHCA preparations for librarians, and gives helpful advice for improving services to older people. It is available (as a reprint from the November-December issue of the Wisconsin Library Bulletin, pp. 507-518), as long as the supply lasts, from: Traveling Library, Wisconsin Free Library Commission, Box 1437, Madison 2.

The Live Long and Like It Library Club of the Cleveland Public Library last November sponsored an Institute on "Education in the Later Years," in association with the Cleveland Press and the Committee on Older Persons of the Cleveland Welfare Federation. Copies of the program for this unique event are available from Miss Fern Long, Supervisor of the Library's Adult Education Department, 325 Superior Avenue, Cleveland 14.

A limited supply is available of the report HEW's Regional Conference of State health, ed cation, and welfare representatives, which was (held November 30-December 1, 1959, in New Yor N City. It includes progress reports from Delawan list New Jersey, New York, and Pennsylvania, as we St as recommendations of various Conference work be shops on health, education, welfare, housing, en ch ployment, and rehabilitation. Address request M to: Regional Director, Region II, Dept. of HEW th 42 Broadway, NYC 4.



The December issue of the Social Security Bul Fa letin (Superintendent of Documents, Washing of ton 25, D. C.; \$2.75 a year, single copy 25¢) ha qu an important and interesting report on "Volus Pe tary Health Insurance and Medical Care Expend tures, 1948-58" (p. 3-9), by Agnes W. Brewster

This summary shows what part of the Nation Pe private hospital and medical care bill was met in the voluntary health insurance in 1958; the figure Sta indicate this was more than twice as much as the let 1948 total, but in terms of disposable person inf income the increase was only 30 percent.



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The Annual Journal (24 pp.; November 1959 Dis of the Association of Ohio Philanthropic Home con for Aged, Inc., 1453 Arthur Ave., Lakewood cier Ohio, contains an interesting collection of in formative articles: "The Role of a State Com vis mission on Aging," by N.Y. State Senator Thomas ing C. Desmond; "What Can We Expect From the bee White House Conference on Aging?" by Dr. Kar P. Meister; and others written by recognized experts. A directory of licensed philanthrop Sta homes for the aged in Ohio is included.

Requests for free copies, available in limited and supply, should be made on organizational letter 195 heads.



"Educational Programs and Services of Colour leges and Universities Related to the Aging and cisc the Aged," by Helen S. Wilson, Extension Special [] ist in Gerontology at the University of New Hamp to k shire, is a valuable overall report (17 pp.; pro train cessed). It was presented to the Committee a hs Education for the Aging at the 1959 Annual Con how ference of the Adult Education Association aut Eleven recommendations are included for speed ram ing progress in this comparatively new field day education programming.

Free copies, in limited supply, are available in from Mrs. Wilson at the University in Durham Pre N. H. Requests should be made on organization letterheads.

The Golden Age Clubs of Niagara Falls, Inc., (A Community Chest Agency), 563 Main St., You Niagara Falls, N. Y., officially adopted and pubwan lished in November 1959 a set of "Personnel swe Standards" for their four clubs with a total memwork bership of over 900. Copies are available, free of g, en tharge, in limited supply, from Miss Alice que Mooradian, Executive Director, who reports that HEN these may be the first such standards in New York State.

This brochure (6 pp.; processed) identifies and describes the full-time positions in the Niagara y Bu Falls Golden Age Clubs, as well as duties, hours shin of work, fringe benefits, etc., and sets forth the ha qualifications recommended by the Golden Age

Volue Personnel Committee.

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"Opportunities for San Francisco's Older ation People" (19 pp.), printed as a public service by met in the San Francisco Examiner, 3rd. and Market figure \$ts., San Francisco, Calif., is a pocket-sized bookas the let which is available upon request. It provides ersom information on "how to serve . . . where to go for fun, for health, for help," supplied in large part by the local Community Fund.

This guide was initiated by Social Security 1959 District Office Manager Mrs. Mercia Kahn. A committee of representatives from social agen-Home cies was set up to work on policy regarding ewood format and content. The city Board of Superof in Com visors has passed a formal resolution commend-Thomas ing this project. 60,000 copies have already

om the been printed.

"Fun for Older Adults," compiled by Virginia thropi Stafford and Larry Eisenberg, is a 112-page paperbound book which features games, ideas, limital and how-to's for older adult groups. Copies of the letter 1956 edition at \$1 are available from The Methodist Publishing House in Nashville 2, or in Baltimore 3, Chicago 11, Cincinnati 2, Dallas 1, Detroit 1, Kansas City 6, New York 11, Pittsof Col burgh 30, Portland 5, Richmond 16, San Franing and cisco 2.

Special Illustrated and easy-to-read, this is a volume Hamp to keep anyone from "floundering in planning prop.; programs and activities for older adults." It outlines simple fashion how to plan for older adult fun, al Con tow to work with this age group, and it cites ociation to be observed. In addition to group r speed ames, brain teasers, dramatics, etc., there are field chapters on musical games, singing, crafts, and special bibliography. Most of the credited convailable ributions came from persons in their sixties and Durhan eventies who are active in older adult groups in zations the Methodist churches.

A planned revision, ready sometime in 1960, sell for \$1.25, paper; \$2.00 cloth.

"Recreation Activities for the Handicapped" (309 pp.; \$5.75), by Frederick M. Chapman, Associate Professor of Recreation at the University of Minnesota, was published last month by the Ronald Press Co., 15 E. 26 St., NYC 10.

This practical manual for recreation programming provides descriptions of over 250 activities to fill the leisure hours of the handicapped, as well as leadership methods and theoretical guides to an understanding of behavioral problems. It is designed to meet the needs of those who are planning or conducting activity programs for the handicapped in hospitals, homes, and communi-

The book is well indexed and contains an extensive bibliography.

"Resources and Materials for Workers with the Aging" (6 pp.; processed), is a selective sampling of a large library's resources in the field of aging. Developed for use during an October 1959 Schoolman's Week Workshop, "Constructive Leadership With the Aging," it includes bibliographies, periodicals, background materials, programming resources, and a listing of resource agencies. Free copies, in limited supply, are available from: Coordinator of Work with Adults, The Free Library of Philadelphia, Logan Square, Philadelphia 3.

"Training Volunteers for Service in a Home for the Aged," by Arthur Kalish, originally presented at the 1958 annual meeting of the National Conference of Jewish Communal Service, has been published in the Summer 1959 issue (Vol. 35, No. 4) of the Journal of Jewish Communal Service (150 E. 35th St., NYC 16; \$7 per year, single copy \$2).

The Community Welfare Council of Sacramento, P.O. Box 805, Sacramento 4, Calif., has published a "1960 Directory of Health and Welfare Services" (64 pp.), available for \$1 including tax, postpaid. This is an up-to-date listing of agencies in the Sacramento and East Yolo Areas with established programs of health, welfare, and recreation.

"Aged Programs in Selected Communities," (13 pp., mimeographed, October 1959), has been published by the Jewish Community Service Society, 615 Sidway Bldg., 775 Main St., Buffalo 3, N. Y. Copies are available upon request to Executive Director Albert E. Deemer. This report is particularly concerned with private residence placement and the establishment of small group residences.

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Success at Schenectady Day Hospital

Over 330 discharged patients, and the beginning of a major program in adult rehabilitation, were reported by the Schenectady (N. Y.) City Hospital, now completing the fourth year of a special five-year pilot study in geriatric rehabilitation. Recognizing the need for such a program, the hospital took advantage of newly available space resulting from a decline in the need to treat communicable disease.

A pilot-study contract with the New York State Bureau of Chronic Diseases has made it possible to provide a full range of medical-scientific services for geriatric day-patients. Nursing, physiotherapy, occupational therapy, podiatry, psychological and psychiatric treatment, surgery, pharmacy, and laboratory tests are included. Even dental work, art classes, entertainment, and religion—as well as lunch—are covered by the total charge of \$6.50 daily. This is about half the regular hospital rate. Transportation (counted as free) is provided by the family, the Red Cross, or a hospital station wagon. The day program operates five days a week.

Since the general public in Schenectady knew little about this particular health problem, and the way it could be met, an intensive public relations campaign in radio, TV, press, talks, and demonstrations has been carried out. Many church, service, and civic groups have become interested; contributing publicity, service, equipment, and entertainment.

At the hospital, guided tours for visitors, conducted by members of the staff, are a special feature to help improve public understanding. Round-table discussions are scheduled after each tour.

Patients are referred to the program by family physicians; costs are met through private insurance, the Welfare Department, and privately. A screening board reviews each patient for admission at a weekly luncheon meeting.

For more information and copies of illustrated published reports: Mrs. Elizabeth K. Perkins, Administrator, Schenectady Rehabilitation and Day Hospital, Altamont Ave., Schenectady.

Central Referral and Information Service For Rhode Island's Aged and Chronic

A cooperative project, initiated last year in Rhode Island, provides a central referral and information service for the State's chronically in and aged. Administered by the Rhode Island Council of Community Services with the cooperation of the Rhode Island State Department of Health, and supported by a grant from an independent foundation as well as by State and Federal funds, this project was set up on a three year trial basis in order to evaluate its use and effectiveness.

Under the direction of a well-qualified media social worker, four significant areas are being studied:

- 1). Determination of the feasibility of providing on a statewide basis information in relation available community resources of all types.
- 2). Identification of the particular contribution which a special information service can make to obtain more effective use of existing community resources. This is being done by a careful planned research design.
- 3). Identification and documentation of unmeror inadequately met community needs, as well as an evaluation of the action which a well-staffed council of social agencies can take to fill gaps in health and related services for the chronical ill and aged.
- 4). Determination of the acceptance of consultation services offered by a medical social worker to agencies having little health orientation.

The Rhode Island Council has an active Chronic Disease Committee which has recommended to need for such a central information and referreservice in a recent study.

Before any of the services were started, by program was explained and interpreted to some 600 agencies, professional organizations, and others who are now cooperating.

For more information: Miss Gloria Carbon. R. I. Council of Community Services, Provident